North Carolina Department of the Secretary of State Charitable Solicitation Licensing

Fundraising Disclosure Form for charitable or sponsor organizations				
Form	of	filed with this application		

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1. Applicant Name:					
2. Contractor Name:					
3. Contractor Street Address:					
4. Contractor Telephone Number:					
5. Contractor Type:	Coventurer Fund-rai	ising Consultant			
6. Contract Signing/Execution Date:					
7. Contract services Begin Date:					
8. Contract services End Date:					
9. Is this a continuing or multiyear contract?		☐ YES ☐ NO			
10. Are North Carolina residents solicited for contributation a direct or indirect result of this contract?	ations as	☐ YES ☐ NO			
11. Does contract contain salary, rate, or fee terms? If YES, state terms and conditions below:		☐ YES ☐ NO			
12. Does contract contain bonus terms? If YES, state terms and conditions below:		☐ YES ☐ NO			
13. Does contract contain commission terms? If YES, state terms and conditions below:		☐ YES ☐ NO			
14. Does contract contain expenses terms? If YES, state terms and conditions below:		☐ YES ☐ NO			
15. Does contract contain other compensation terms? If YES, state terms and conditions below:		☐ YES ☐ NO			
16. Amount of funds received resulting from contract since your last license application filing: (For <u>initial</u> applicants: amount of funds received within past fiscal year or past 12 months):					
Answer <u>either</u> or <u>both</u> line items:	Gross Amount Received: \$_				
Net Amount Received: \$					

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Form Revision: 1

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